

PTO/SB/17 (12/97)

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Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Complete if Known

FEE TRANSMITTAL

Note: Effective November 10, 1998.
Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$980.00)

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
- Deposit Account Number: 05-0840
Deposit Account Name: Eli Lilly and Company
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance
2. ☐ Payment Enclosed: ☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	750	201	395	Utility filing fee	
106	350	206	175	Design filing fee	
107	550	207	275	Plant filing fee	
108	790	208	395	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. CLAIMS

Total Claims	Extr a	Fee from below	Fee Paid
Independent Claims	-20**	X 18	
Multiple Dependent Claims (first time)	-2**	X 88	
		200	

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	
102	88	202	44	Independent claims in excess of 1	
104	200	204	130	Multiple dependent claim	
109	88	209	44	Reissue independent claims over original patent	
110	18	210	9	Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Typed Name: R. Craig Tucker
Signature:

Complete (if applicable)

Reg. Number: 45,165

Date: October 28, 2004

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office at 703-872-9306 on the date shown below.

Billie L. Banks

Type or print name of person signing certification

Signature:

Date: 10/28/2004